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APPLICANTS

Rama Akella, Austin, TX;

John P. Ranieri, Austin, TX;

CMW
5/11/2006

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/17/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 27	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no				
Verified and Acknowledged Examiner's Signature <i>Chad M. Woodard</i> Initials <i>CMW</i>				

ADDRESS

45488

WILLIAMS, MORGAN & AMERSON

10333 RICHMOND, SUITE 1100

HOUSTON, TX

77042

TITLE

Protein mixtures for wound healing

FILING FEE RECEIVED 2196	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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